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CONFIRMATION

TO: Central Fax Delivery	COMPANY: U.S. PATENT & TRADEMARK OFFICE
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From: Richard A. Jones

Date: October 14, 2005

Total Number of Pages Including Cover Sheet: 5

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OCT 14 2005

Message:

RE: Application No.: 10/611,611 - Filing Date: July 1, 2003
 Applicant(s): Noel F. Dehne et al.
 Group Art Unit: 3651
 Examiner: Mark A. Deuble
 Title: Workpiece Transport System With Independently Driven Platforms
 Attorney Docket: 70520-2046
 Reply To Office Action Dated September 14, 2005

Transmitted herewith are the following documents:

- 1) USPTO Transmittal Form (including Certificate of Facsimile Transmission) (1 page);
- 2) Fee Transmittal For FY 2005 (1 page); and
- 3) Response To Restriction Requirement (2 pages).

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OFFICE CODE

Client Name:
 Client/Matter Number: 70520-2046
 Attorney Number: 1987
 Secretary/Ext.: G. Poland/7522

Matter Name:
 Attorney Initials: RAJ
 No. of Pages: 5
 Amount:

Doc

PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0651-0031

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FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number

10/611,611

Filing Date

July 1, 2003

First Named Inventor

Noel F. Dehne

Art Unit

3651

Examiner Name

Mark A. Deuble

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OCT 14
2005

Attorney Docket Number

70520-2046

ENCLOSURES (Check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name

Dickinson Wright PLLC

Signature



Printed name

Richard A. Jones

Date

10/14/05

Reg. No. 39,242

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the

Signature



Typed or printed name

Gail Poland

Date

10-14-05

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Doc Code:

PTO/SB/17 (12-04-v2)

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Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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Effective on 12/08/2004. <i>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</i>		Complete if Known	
FEE TRANSMITTAL for FY 2005		Application Number 10/611,611 Filing Date July 1, 2003 First Named Inventor Noel F. Dehne Examiner Name Mark A. Deuble Art Unit 3651 Attorney Docket No. 70520-2046	RECEIVED CENTRAL FAX CENTER OCT 14 2005
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27			
TOTAL AMOUNT OF PAYMENT	$x > 5$	\$0.00	

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order None Other (please identify): _____
 Deposit Deposit Account Number: _____ 04-1061 Deposit Account Name: Dickinson Wright PLLC

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee
 Charge any additional fee(s) or any underpayment of fee(s) under 37 CFR 1.16 and 1.17 Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees Paid (\$)
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEESFee Description

Each claim over 20 (including Reissues)

Small Entity	Fee (\$)
50	25
200	100
360	180

Each independent claim over 3 (including Reissues)

Multiple Dependent Claims
Fee (\$)

Multiple dependent claims

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Fee (\$)	Fee Paid (\$)
- 20 or HP =	x	\$50.00	=	\$0.00	

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	
- 3 or HP =	x	\$200.00	=	\$0.00

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listing under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

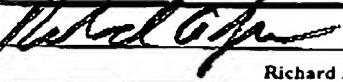
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 =	0	/ 50 0 (round up to a whole)	x \$250.00	= \$0.00

4. OTHER FEE(S)

Non-English specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): _____

SUBMITTED BY

Signature		Registration No. (Attorney/Agent)	39,242	Telephone	(248) 433-7285
Name (Print/Type)	Richard A. Jones				
	Date 10/14/05				

This collection of information is required by 37 CFR 1.138. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Confirmation No. 1450

Application No.: 10/611,611)
Filing Date: July 1, 2003)
Applicant(s): Noel F. Dehne et al.)
Group Art Unit: 3651)
Examiner: Mark A. Deuble)
Title: Workpiece Transport System)
With Independently Driven)
Platforms)
Attorney Docket: 70520-2046)

RESPONSE TO RESTRICTION
REQUIREMENT

Commissioner For Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

Dear Sir:

This is in response to the Office Action dated September 14, 2005, for which the one-month shortened statutory period for response expires on October 14, 2005. The Examiner has required restriction to one of the following inventions, Invention I (Claims 1-11 - drawn to a manufacturing operation), Invention II (Claims 12-17 - drawn to a platform for transporting workpieces), and Invention III (Claims 18-21 - drawn to a method of moving platforms through a manufacturing operation). Applicants hereby elect, without traverse, the claims of Invention I (Claims 1-11) and request withdrawal of Invention II and Invention III claims from consideration with the understanding that Applicants may pursue the withdrawn claims in a subsequent continuation or divisional application.

U.S. Application Serial No. 10/611,611
Attorney Docket: 70520-2046
Reply to Office Action of September 14, 2005

REMARKS

Favorable consideration and allowance of this application is respectfully requested.

Respectfully submitted,

DICKINSON WRIGHT PLLC
Attorneys for Applicants

Date: 10/14/05

By: Richard A. Jones
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Reg. No. 39,242

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